King County

KING COUNTY AUDITOR'S OFFICE

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Medical Examiner's Office: Continuous Improvement Can Strengthen Control Environment

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EXECUTIVE SUMMARY

The King County Medical Examiner's Office (KCMEO) has practices in place that align with recommended controls to safeguard high-risk items like cash, medication, and suspected illicit drugs its investigators gather during its death investigations. However, KCMEO has not comprehensively assessed risk related to high-risk items, and there are some gaps in its ability to detect missing, damaged, or stolen items; and to ensure its staff can safely handle drug evidence. Additionally, by implementing additional review processes, KCMEO can better ensure that the selection of service providers is done fairly and ethically. Finally, staff from local tribes spoke positively about working with KCMEO investigators. However, some investigators reported that better training and resources could help them feel more prepared for working with American Indian or Alaskan Native families, tribes, and communities.

Content Warning, Terms

This report contains references to death investigations.

While we do not include any information about specific cases, the report includes references to death, death investigations, and decedents (the term used by King County Medical Examiner's Office to refer to people who have died).

Acknowledgment

We would like to thank the King County Medical Examiner's Office (KCMEO) staff for their participation in this audit. KCMEO staff were responsive and collaborative throughout the audit. Staff members greatly facilitated the audit team's ability to conduct multiple site visits across multiple days and shifts, coordinate visiting the King County Indigent Remains Program burial services, and organize a ride along with investigations staff. KCMEO data and finance staff were responsive and helpful in providing access to information.

KCMEO leadership and staff demonstrated a desire and willingness to continuously improve. Over the course of the audit, KCMEO leadership and staff consistently worked to implement self-identified improvements to its processes as well as potential improvements flagged by the audit team. KCMEO leadership discussed and made determinations about these changes during its regularly held quality assurance meetings. Staff members we interviewed, including management, investigations staff, autopsy staff, and administrative staff, were enthusiastic to show and explain their work, discussed ways they were contributing to better practices, and were open with the audit team about areas where there could be improvement. These efforts demonstrate KCMEO's commitment to continuous improvement as well as to the safety and security of its staff, the decedents in its care, and the property and evidence in its possession.

KCMEO staff strive to accommodate the cultural and religious requests of the families it works with. In the conversations with the audit team, KCMEO staff repeatedly emphasized their desire to assist families by respecting and meeting families' cultural or religious needs to the greatest possible extent. These desires are reflected in KCMEO staff's efforts to regularly communicate with families to learn their needs and the willingness of staff to take the necessary time to accommodate familial requests whenever appropriate.

REPORT HIGHLIGHTS

What We Found

The King County Medical Examiner's Office (KCMEO) gathers high-risk items like cash, medication, and suspected illicit drugs during its death investigations. While the number of medication items KCMEO collected decreased since 2020, the number of suspected illicit drug items collected increased from about 200 items in 2020 to about 850 items in 2025. Similarly, the amount of US currency KCMEO collected increased from about $91,000 in 2020 to over $140,000 in 2025. We found that KCMEO implements some controls to prevent the loss or misuse of these items. However, KCMEO has not comprehensively assessed risk to further improve its safeguards, and there are some gaps in its ability to detect loss, theft, or misuse. Additionally, we found some inconsistency in practices to ensure its staff can safely handle drug evidence.

In our review of the staff who have decision-making authority over the King County Indigent Remains Program and providers that KCMEO partnered with for funeral and cremation services from 2021 to 2025, we found no indications of conflicts of interest. However, we identified gaps in controls to prevent and detect conflicts of interest.

Representatives from local tribes spoke positively about working with KCMEO investigators, stating that, in their experience, investigators take time to work with them to ensure respectful services. Some investigators reported that better training and resources could help them feel more prepared for working with American Indian or Alaskan Native tribes and communities before they go out into the field.

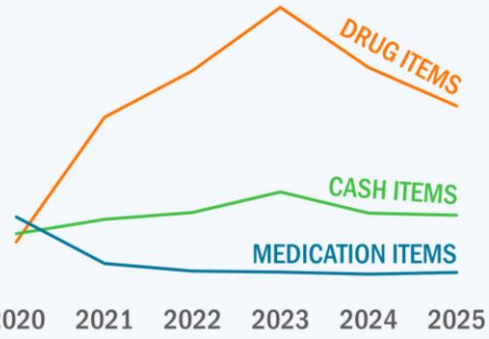
What We Recommend

We make recommendations for KCMEO to conduct a risk assessment and improve controls over high-risk items to detect the loss of items and better ensure staff safety. We also make recommendations so KCMEO can ensure that the selection of service providers is done fairly and ethically. Finally, we make recommendations to help ensure staff are prepared for working with tribes and communities.

Why This Audit Is Important

KCMEO provides vital services to county residents through its death investigations, autopsies, and overdose surveillance work that inform public health and criminal legal processes. Its work involves risks that include collecting high-risk materials while conducting death investigations. Ensuring it has sufficient internal controls over its high-risk items helps protect staff from harm, safeguard evidence and property from being taken or damaged, and prevent King County from reputational, legal, and financial loss. It is also important that KCMEO services be as equitable as possible and ensure its staff are prepared to work with tribes and communities. A lack of appropriate attention to these risks could lead to families and communities having negative experiences with government officials.

High-risk item collection has increased since 2020.



Source: King County Auditor's Office analysis of King County Medical Examiner's Office data

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Section 1: Reducing Risk of Loss or Harm Associated with High-Risk Items

SECTION SUMMARY

The King County Medical Examiner's Office (KCMEO) has preventive controls in place to protect high-risk items in its possession, however KCMEO has not completed a risk assessment to help prioritize actions to improve its ability to detect if high-risk items are missing or damaged. KCMEO staff collect high-risk items, such as suspected drugs and cash, as property and evidence during its investigations. To safeguard these items, KCMEO leadership has implemented a number of leading practices for preventing loss or misuse. However, KCMEO lacks some controls to help detect if high-risk items have been taken or damaged. By completing a risk assessment and using the assessment to prioritize further controls, KCMEO can better safeguard high-risk items in its possession. Additionally, in our review of the staff who have decision-making authority over the King County Indigent Remains Program (KCIRP) and the providers that KCMEO partnered with for funeral and cremation services from 2021 to 2025, we found no indications of perceived conflicts of interest. However, we identified several gaps in KCMEO processes to prevent and detect conflicts of interest that, if left unaddressed, could result in financial and reputational loss for King County.

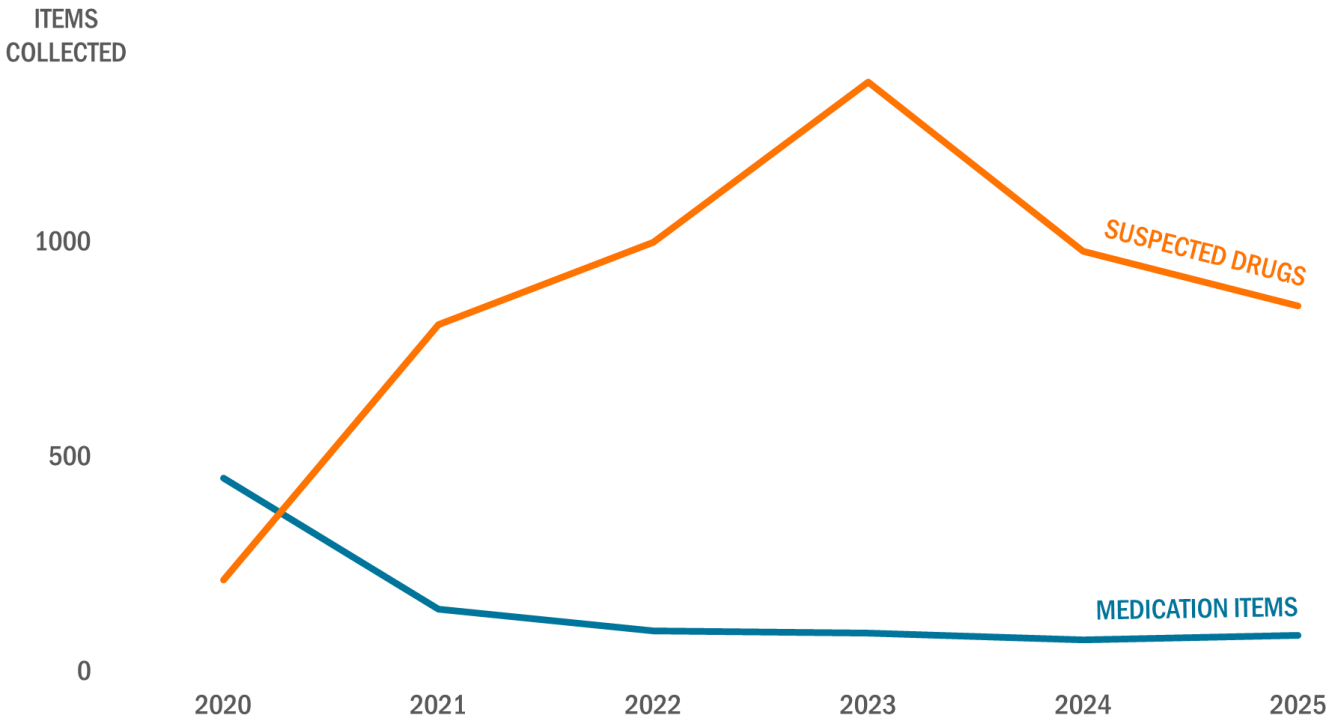
High-risk items present risks

KCMEO staff collect property and evidence items that are at higher risk of being taken or misused, and that can present risks to staff, King County, or the public. KCMEO investigates sudden, unexpected, and unnatural deaths in King County. As part of their investigations, staff collect high-risk items such as medication, drugs, and cash as property and evidence. While KCMEO has reduced the number of medication items its investigators collect, the number of suspected illicit drug items investigators collect has increased from about 200 items in 2020 to about 850 items in 2025, peaking in 2023 at over 1,300 items (see exhibit A).[1] This increase in the amount of illicit drugs collected by KCMEO staff is likely related to trends in fatal

[1] A drug or medication item is an entry into KCMEO's case management system that contains an amount of suspected illicit drugs or medication. Medication items include prescription or over-the-counter medication while suspected illicit drugs are substances that are illegal to sell, produce, or use. Because of the way KCMEO collects items and enters data, it is not possible to provide a more specific count or weight of drugs or medication. KCMEO also collects paraphernalia for suspected illicit drugs such as foil, pipes, and other items with residue. Adding these items would increase the item counts.

overdoses in King County. This period also includes the implementation of KCMEO's Overdose Surveillance Program.[2]

EXHIBIT A: King County Medical Examiner's Office staff collected fewer medication items per year from 2020 to 2025, but the number of suspected illicit drug items increased over that time, peaking in 2023.



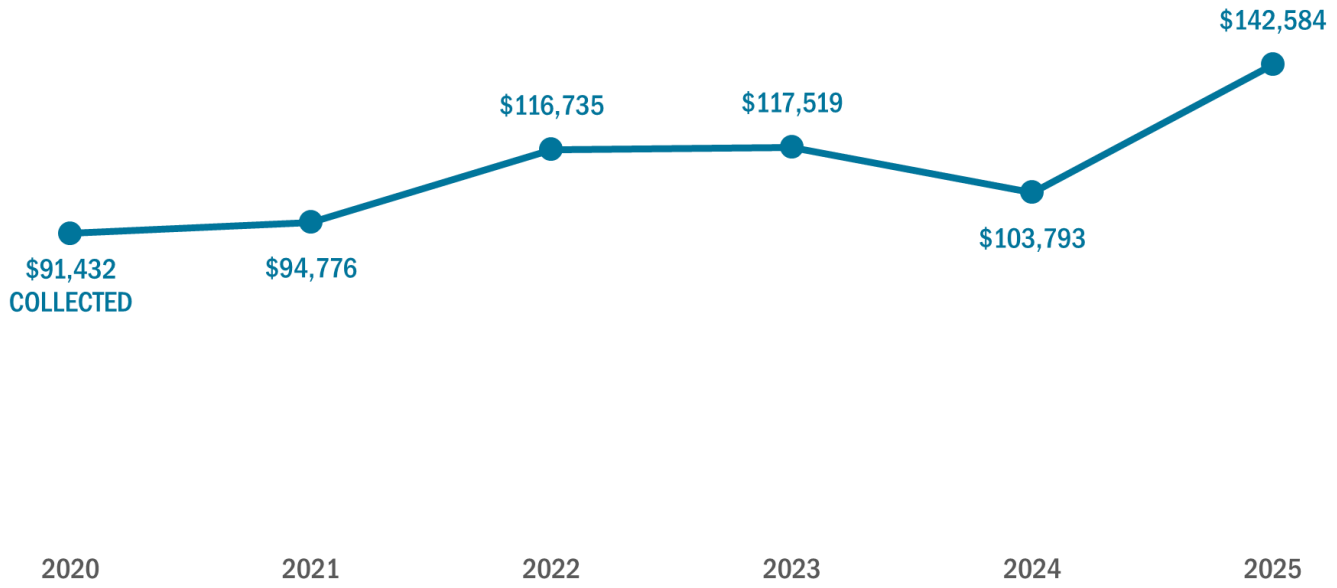
Source: King County Auditor's Office analysis of King County Medical Examiner's Office data. See appendix 2 for limitations.

The amount of cash property collected by KCMEO has also increased since 2020, rising from about $91,000 a year in 2020 to over $140,000 per year by 2025 (see exhibit B). Most of this cash is released back to the decedent's next of kin, but King County deposits a small amount of unclaimed cash toward the King County Indigent Remains Program.[3]

[2] KCMEO Overdose Surveillance staff test drug samples collected from the scenes it investigates in order to help determine cause of death and provide close to real-time information to public health agencies about fatal overdose trends locally and statewide.

[3] For an indigent case where a legal representative has not claimed the decedent's property, KCMEO will use any cash collected with the decedent to help pay for their cremation and burial. Any amount exceeding these costs are then processed by King County Finance and held until these funds are sent to the Washington State Department of Revenue.

EXHIBIT B: The amount of US currency the King County Medical Examiner's Office collects and safeguards has increased since 2020.

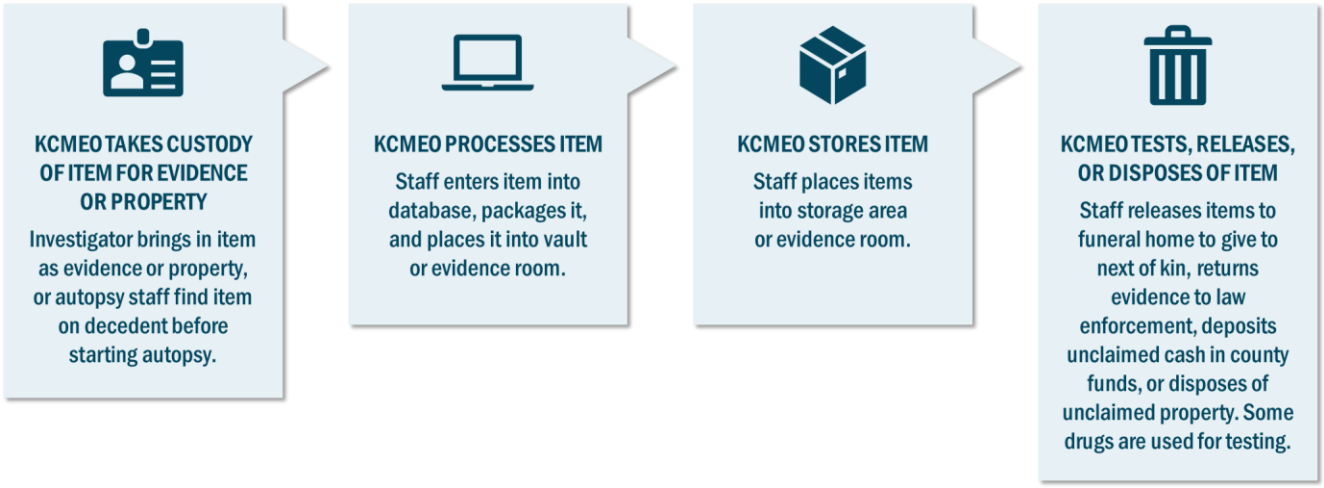


Source: King County Auditor's Office analysis of King County Medical Examiner's Office data. See appendix 2 for limitations.

Note: The currency totals represent the amount collected over the course of the calendar year. The King County Medical Examiner's Office returns most of the currency it collects to next of kin within a shorter period.

After collecting medication, suspected drugs, or cash from the scenes it investigates, KCMEO must store and safeguard the items until they are tested, returned, or disposed of (see a simplified depiction of this process in exhibit C). These items are considered high risk because they are small and valuable, making them easier to lose and more attractive to be taken or misused. Drugs are also high risk because they can present risks to staff or the public, for example, if the drugs end up back in the community and are consumed. The loss or destruction of property and evidence can be harmful to the families of decedents, damage the reputation of the County, and could negatively impact potential legal cases.

EXHIBIT C: King County Medical Examiner's Office (KCMEO) staff collect high-risk items as property and evidence during its investigations.



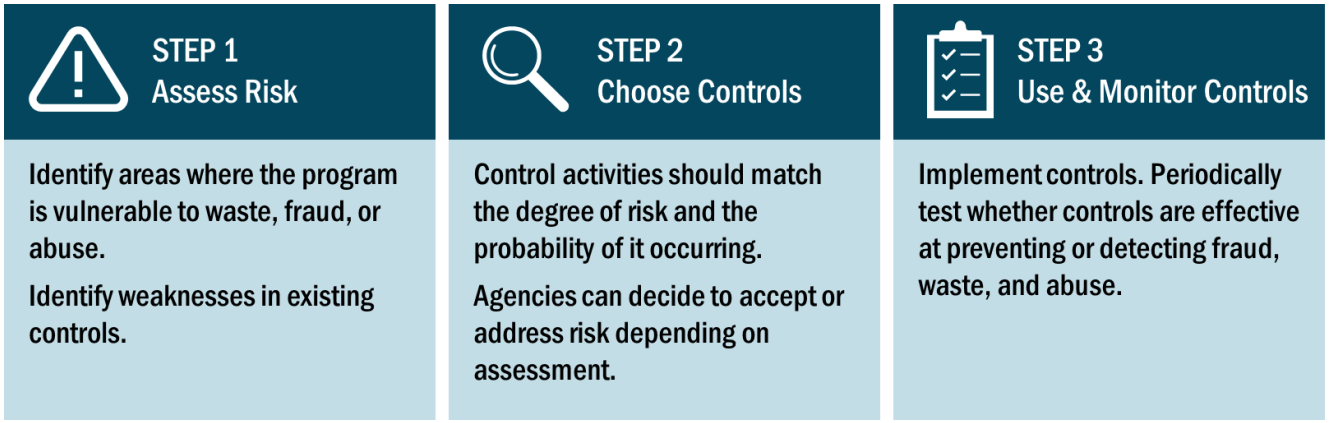
Source: Simplified summary based on King County Auditor's Office analysis of KCMEO processes

KCMEO lacks a risk management strategy to inform its approach

KCMEO has not developed a risk management strategy for high-risk items to identify which controls would be most effective for its operations. During our observations, interviews, and review of key documents and data, we identified gaps between the controls KCMEO has in place and leading practices for safeguarding high-risk items. We provide more information about these gaps below and in appendix 1. Standards state that when it is not feasible to implement all potential controls due to limited capacity or resources, an organization should choose which controls to implement based on the assessed risk, the scale of the organization, and the costs and benefits of the controls. While KCMEO has improved some high-risk item controls, it has not yet conducted a risk assessment and has not developed a risk management strategy.

Risk management includes risk assessment, risk mitigation, and ongoing evaluation of the assessment and mitigation processes (see exhibit D). A risk assessment involves identifying risks, evaluating their likelihood and potential impact, and identifying ways to reduce risk. Risk mitigation uses the findings of the risk assessment to prioritize and implement measures to reduce risk. Conducting risk assessments is both best practice and a useful way to help identify and manage gaps in an organization's controls before problems occur. KCMEO leadership can use the results of a risk assessment to inform which of the mitigation strategies to prioritize based on its limited staff and financial resources.

EXHIBIT D: The basic steps to develop a prevention and detection program.



Source: King County Auditor's Office summary and application of *Standards for Internal Control in the Federal Government* (Green Book), published by the United States Government Accountability Office in May 2025

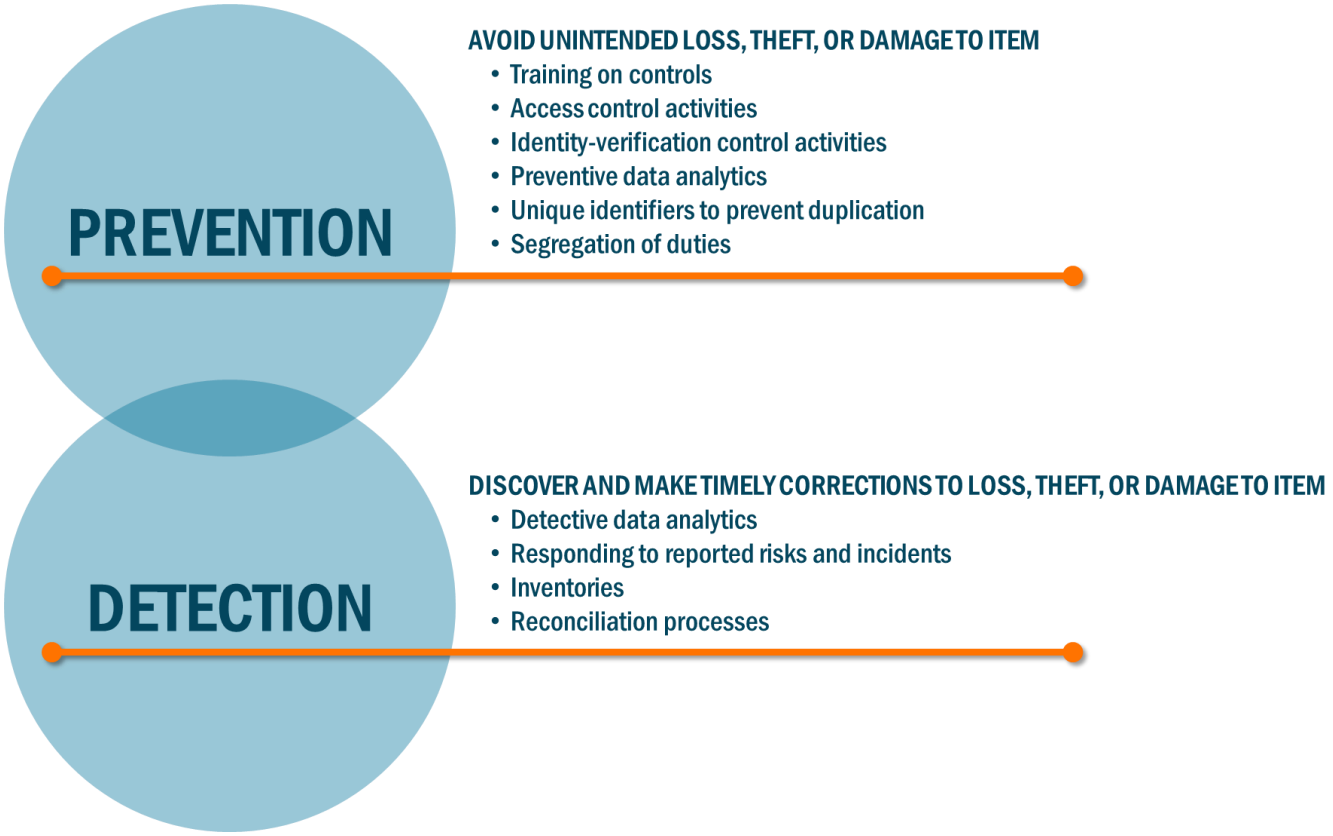
Recommendation 1

The King County Medical Examiner's Office should develop, document, and implement a comprehensive risk management strategy for high-risk items, including regular risk assessment, risk mitigation, and monitoring and review of these processes.

Controls help prevent loss and detect when loss has happened

Controls to safeguard high-risk items can prevent theft or loss from occurring and can detect when theft or loss has occurred. Because of the potential risks associated with high-risk items, such as the drugs and cash that KCMEO employees handle, professional organizations recommend implementing controls to safeguard items based on identified risks. There are different types of controls. Preventive controls are safeguards designed to avoid an unintended event before it happens. For instance, separating responsibilities during the processing and storage of a high-risk item across multiple staff members, called "segregation of duties," can help prevent theft and ensure accurate records. Detective controls are safeguards designed to discover and correct for an unintended event after it occurs. For instance, conducting regular inventories can help detect when an item has been stolen, lost, or damaged. Some controls can be implemented as both preventive and detective depending on when or how they are implemented. Exhibit E shows these different types of controls and how they work together.

EXHIBIT E: Organizations assess and mitigate risk through prevention and detection.



Source: King County Auditor's Office adaptation of US General Accountability Office standards GAO-25-107721 and GAO-15-5938P

KCMEO has controls to safeguard items

KCMEO follows several leading practices for preventing the loss or misuse of high-risk items, helping to ensure items in its possession are safeguarded from loss or theft. Based on our analysis and observation of KCMEO practices as compared to practices recommended by professional organizations, federal agencies, and state or county requirements, KCMEO has fully or partially implemented several preventive controls to safeguard the high-risk items in its possession. For example, KCMEO has implemented segregation of duties for some procedures, such as having a supervisor or a more senior investigator verify that the property and evidence collected were accurately recorded by investigators and autopsy technicians. We observed these processes during our site visits (see exhibit F). Additionally, KCMEO stores items in secure locations which are under video surveillance, which we also observed. During the audit, KCMEO further increased the security of its processing and storage locations by reducing the number of people who can physically access medication and drugs that have been stored for later

testing and disposition. KCMEO management also expanded the amount of locked storage available for medication and drugs to help ensure that the office is better prepared for storing more items when needed. KCMEO also implemented a policy in 2024 to stop collecting firearms during its investigations, which helped reduce the type and number of high-risk items in its possession.

EXHIBIT F: King County Medical Examiner's Office staff implementing controls over suspected drug evidence processing and disposition.

Source: King County Auditor's Office

Control gaps leave some risks unaddressed

We identified some gaps in KCMEO's processes for storing and safeguarding high-risk items, increasing the risk that items could be lost or could injure staff. We detail some gaps in KCMEO's processes below and in appendix 1 that, if left unaddressed, increase the risk of loss, theft, or misuse of high-risk items. Some of the gaps listed also present safety risks to employees who could become injured while processing high-risk items. Including consideration of the gaps below, and in appendix 1, when conducting its risk assessment could help prevent harm to staff and the public, and help to reduce the risk of legal, financial, or reputational loss to King County.

KCMEO is missing some controls to detect if items have been lost

KCMEO is missing some controls to monitor and detect whether high-risk items have been lost or misused. To effectively mitigate risks, agencies should implement a combination of preventive and detective control activities. As discussed earlier in this report, preventive controls are focused on preventing loss, theft, or damage of items, and detective controls help ensure the agency finds out when theft, loss, or damage happen. We found that KCMEO is missing some detective controls that would discover and correct for any loss or misuse of high-risk items stored at KCMEO. In the paragraph below, we describe gaps we identified and give examples of potential detective controls that KCMEO should consider implementing to bolster its safeguards for high-risk items in its possession.

KCMEO does not conduct regular inventories of high-risk items, reducing its ability to ensure items have not been lost or taken. Leading practices recommend items be inventoried at least annually to detect potential loss, theft, or damage. Completing an inventory requires reliable data and regular processes. KCMEO periodically processes medication and drug evidence for final disposal, which can help monitor for potential loss, theft, or damage to drug items. However, gaps in this process prevent it from serving as an inventory control, making it less likely that missing or damaged items will be identified. Specifically, during our on-site observations, we viewed a disposition process where three staff members disposed of medication and drug evidence. Each staff had a segregated duty in the process, which aligns with best practices. However, the steps to check the contents against the record were in an inconsistent order and were done quickly, which reduces its effectiveness as an inventory control that can detect whether items have been lost.

Additionally, the information KCMEO records is not complete or reliable enough to allow for monitoring or inventorying of high-risk items to ensure all items are accounted for. KCMEO maintains paper and electronic records for the property and evidence it collects, and the electronic records are checked by one to three people other than the person who collected them, which meets leading practices. However, the information KCMEO records is not complete enough to allow for periodic inventories of high-risk items to ensure all items are accounted for. For example, KCMEO records the count of pills, but it does not record the weight of suspected illicit drugs. This means the person trying to conduct an inventory could not detect whether a partial amount of the suspected drug was missing. KCMEO stated it would be challenging to track the weights of suspected drugs as

staff often remove very small amounts for testing purposes. They also noted that weighing would be burdensome for its limited staff resources.

KCMEO data is also not reliable or complete enough to review trends over time that could detect potential issues for leadership to investigate further. For example, the KCMEO records form has a data field to capture who collected the item. However, we observed that sometimes the person processing the item will mark themselves as the person who collected the item when they had not collected the item. This reduces KCMEO's ability to monitor trends related to high-risk items that might detect if there are patterns that should be investigated further.

KCMEO lacks video surveillance in the storage vault where property and evidence are stored, creating a gap in KCMEO's ability to prevent and detect theft. We observed that KCMEO has a camera in the first room of the storage area where items are processed. However, KCMEO does not have a camera in the second room of the storage area, known as the vault, where items are held until they are released, used for testing, or disposed. Leading practices state that video surveillance should be where items are stored to prevent and detect theft. KCMEO stated that video surveillance was not placed in the second room due to technical limitations that existed when the agency moved into its current space at Harborview Medical Center (HMC) in 2008, but that it might be possible with modern technology.

KCMEO does not review electronic data showing who has accessed its secure vault to ensure evidence or property has not been accessed in ways that differ from expectations. Although KCMEO keeps high-risk items in a secure location, leadership does not review who accessed the room. KCMEO is unsure whether the ability to record access to the vault locking system can be added. KCMEO has not tried to retrieve this information. KCMEO can review security camera footage for at least 30 days in the processing room to assess access to secure locations if a specific reason arose, but staff stated that they do not review footage regularly. KCMEO staff stated they can also obtain card entry records through HMC for a longer period; however, this only covers who entered the processing room, not the storage vault.

Inconsistent processing and storage practices create safety and loss risks

Staff sometimes collect and package drugs and paraphernalia in a way that creates safety risks. Investigators we interviewed stated it is common practice for investigators to process items they did not collect, which involves cataloging the items into the data system and then re-packaging and labeling the items for final storage in the vault. Some investigations staff said they have concerns about processing drugs collected by other investigators because individual investigators have different ways of collecting, pre-packaging, and labeling drugs. This results in issues such as investigators packaging powder substances loosely in manila envelopes that can aerosolize (convert into airborne particles) or spill when opened by others. Some staff also stated that syringes, broken glass, or other items with sharp edges sometimes do not fit well in the available packaging. Improper packaging increases the risk of exposing or injuring staff who handle, process, or dispose of evidence, and could also result in the evidence being damaged or destroyed. Leading practices state that high-risk items should be labeled and packaged in a way that ensures the safety of staff.

Inconsistencies in how KCMEO staff collect and package high-risk items may result from unclear expectations. The KCMEO investigator handbook instructs staff to photo-document drug and medication items at the scene and to bring a representative sample of the illicit drugs to the KCMEO. Investigators receive training on evidence collection from a more senior investigator during their probation period, and investigators stated they use their own judgment to determine how to collect drug or medication evidence and what constitutes a representative sample, depending on the circumstances of the scene. While investigator discretion may be necessary to respond to the different circumstances they encounter, some investigation staff shared that the amounts they see other investigators bring in can vary substantially and without clearer guidelines it can be difficult to know if they are meeting expectations. This means some investigators may be collecting more evidence material than needed, increasing the amount of high-risk items KCMEO needs to safeguard. Investigators and managers we interviewed also noted that its investigator handbook is outdated. While leadership does periodically update operational procedures and any related portions of the handbook, investigations staff noted that these updates are digitally communicated and stored in a way that is difficult for staff to access when they need to refer to the most up-to-date policy or procedure. Leading practices state that staff should be trained and stay current on evidence and property controls.

KCMEO leadership acknowledged this feedback and noted that changes will be incorporated in the more extensive update to policies and procedures which is underway; and KCMEO is exploring how best to document and communicate any additional changes to its operational manuals to staff.

Space limitations could increase the risk that high-risk items are lost or stolen. During one of our site visits in 2025, we observed drugs stored outside of the designated secured storage location within the KCMEO's vault. KCMEO staff noted that this occurred because of the large amount of drug property collected and accrued over time, leading to some items being stored in overflow locations outside of the designated secure storage area. These overflows happen, in part, because KCMEO must coordinate disposal of drug items through the King County Sheriff's Office. Additionally, KCMEO reported other law enforcement agencies may not pick up drug evidence in a timely manner, contributing to space constraints at KCMEO. KCMEO's policy is to retain items for one year as a courtesy to law enforcement agencies. As mentioned previously, KCMEO took steps during the audit to expand its secured storage space for drugs, which has resolved the immediate issue. Criteria states that retention and disposition policies should be informed by the agency's capacity to prevent the need for unsecured storage.

Recommendation 2

The King County Medical Examiner's Office (KCMEO) should use the results of its risk assessment completed in response to Recommendation 1 to inform which **preventive and detective** controls to improve or implement to prevent loss, theft, misuse, and injury resulting from the high-risk items in its possession. As part of this assessment, KCMEO should document consideration of the following controls:

- conducting at least annual inventories of high-risk items
- monitoring high-risk item data for potential issues to investigate further
- improving data to support monitoring and inventory controls
- installing video surveillance in the secure storage vault
- ensuring more detailed access data for the secure storage vault
- improving collection and packaging procedures for high-risk items
- ensuring more consistent item labeling that makes contents clear
- updating retention and disposition policies to align with storage capacity.

KCMEO management could bolster processes to prevent conflicts of interest

KCMEO management requires staff to disclose financial or other interests in entities that engage in business with KCMEO. Strengthened processes, however, could increase leadership's ability to detect and prevent conflicts of interest that could result in financial and reputational loss for King County. KCMEO management informs staff that they must disclose any outside interest through an online form. However, in interviews, some staff were not aware of any requirement to submit documentation regarding conflicts of interest or other outside interests and did not recall submitting any such forms in the past. Recent departmental changes to the method and types of disclosures that staff are asked to submit may contribute to confusion about which job classifications are required to submit which forms. The handbook which outlines the policies and procedures for investigations staff includes excerpts of the King County Code of Ethics which provides expectations and a general definition of "conflicts of interest." However, KCMEO's office policies and procedures for other job classifications do not include any reference to the King County Code of Ethics, and none of the policy handbooks clearly define or provide examples of what may constitute a conflict of interest within the context of KCMEO, the process for disclosure, or the penalty for noncompliance, increasing the risk that some staff could be confused about how to meet requirements. Instead, staff are directed to general documents maintained on King County's intranet. Creating a procedure to document and review for compliance, such as with annual disclosures, is a leading practice for managing conflicts.

Indigent Remains Program

KCMEO provides burial services for county residents with limited resources through the Indigent Remains Program. The program provides for cremation and burial for King County residents who have died without resources or next of kin to claim their remains for a burial.

KCMEO partners with local businesses to provide funeral and cremation services for the KCIRP, however KCMEO does not have documented procedures in place that would ensure the program's consistency and fairness. Funeral homes which take part in the KCIRP are paid a rate set by King County Code.[4] KCMEO distributes the cases across the program participants on a rotating basis based on the

[4] Established in King County Code Chapter 8.64

businesses' availability. In our review of the staff who have decision-making authority over the KCIRP and the providers that KCMEO partnered with for funeral and cremation services from 2021 to 2025, we did not observe indications of conflicts of interest. However, the procedures to add participants are not formally documented and how the cases are distributed across participants is not reviewed by management, creating a gap in oversight that would ensure that participation and selection follow a clear process that is fair and aligns with ethics policies. By implementing additional processes and working with others in the Department of Human Resources or Public Health – Seattle & King County, KCMEO management can better manage potential conflicts and ensure that selection of service providers is done fairly and ethically.

Recommendation 3

The King County Medical Examiner's Office (KCMEO) should update its policies to define and outline expectations regarding reporting, monitoring, and responding to conflicts of interest for all job classifications. KCMEO should ensure its disclosure policy aligns with the King County Code of Ethics as well as requirements from the Department of Human Resources and Public Health – Seattle & King County.

Recommendation 4

The King County Medical Examiner's Office should ensure that its efforts to define and control for conflicts of interest, as detailed in Recommendation 3, include provisions for the entities it partners with for King County Indigent Remains Program services.

Section 2: Increasing Staff Preparedness to Meet Cultural or Religious Needs of American Indian or Alaskan Native Tribes and Communities

SECTION SUMMARY

Members of KCMEO staff would like training and informational resources to improve their preparedness to work with American Indian or Alaskan Native tribes and communities. Staff from local tribes spoke positively about their experiences working with KCMEO. They stated investigators were accommodating for the cultural and religious needs of tribe members. However, there are opportunities for KCMEO to address gaps in staff preparedness for working with American Indian or Alaskan Native tribes and communities and to meet state requirements. KCMEO lacks training and resources for investigators specific to working with American Indian or Alaskan Native decedents, leading to a potential risk that interactions could go poorly because staff do not know whether they are doing anything inappropriate until after the interaction is over.[5] Additionally, KCMEO does not have written material for family members that explains that the KCMEO can potentially accommodate cultural needs, reducing opportunities for tribes and family members to ensure the KCMEO staff know how best to serve American Indian or Alaskan Native communities.

KCMEO staff work with decedents of many tribes

KCMEO had between 110 and 160 cases per year involving American Indian or Alaskan Native decedents from 2021–2025, including members of at least 109 US federally recognized tribal entities.[6] KCMEO investigators are often the first and main point of contact between KCMEO and family members. Investigators respond to scenes, conduct interviews, collect evidence and personal effects, and transport

[5] The term "decedent" refers to the person who died.

[6] This could be an undercount of cases with indigenous decedents as there were also decedents whose data indicated they were indigenous but not affiliated with a federally recognized entity or were affiliated with entities outside the United States, such as people of the First Nations of Canada. This could also be an overcount of cases involving American Indian or Alaskan Natives as we included cases where race was listed as American Indian or Alaskan Native, but affiliation was not included and therefore could include indigenous people who are not American Indian or Alaskan Native. It is also likely an undercount of tribal entities as only about half of cases in the scope included tribal affiliation. KCMEO is improving collection of data over time — about 80% of cases in 2024 and 2025 listed an affiliation. KCMEO also noted that race and tribal information is sometimes not known during an active case, but KCMEO updates its data if it receives data from external sources such as death records completed by funeral directors and families.

decedents to the KCMEO. Investigators also confirm identities, locate and notify next of kin, and inform next of kin of processes and responsibilities following the death of a family member. Investigators then work internally to ensure that other staff within KCMEO, including autopsy technicians and forensic pathologists, understand any family requests or needs.

Staff from local tribes spoke positively about KCMEO staff

Staff from local tribes had generally positive feedback about KCMEO staff. In conversations with the audit team, staff from the Muckleshoot Indian Tribe and Snoqualmie Indian Tribe stated that they had positive experiences working with KCMEO staff. They stated investigators were generally accommodating for the cultural and religious needs of tribal members and provided specific examples of times when investigators worked with families to ensure spiritual practices could be done. One staff member noted that KCMEO practices have improved even more in the last several years. When we brought critical feedback about autopsy and communication issues to the attention of KCMEO, KCMEO staff set up time to speak with the tribe staff member to discuss the issues.

KCMEO lacks written notification of potential accommodation for families

KCMEO does not have written material for families that explains it can potentially accommodate cultural needs, reducing the opportunities for tribes and family members to ensure that KCMEO staff know how best to serve them. While KCMEO must adhere to state mandates and accreditation standards, in many circumstances staff may be able to accommodate the religious and cultural needs of families. Families may not be aware of their options because the written communication that KCMEO staff give to families does not state how to make accommodation requests, reducing opportunities to better serve families. KCMEO has a positive practice of providing a handout that investigators can give to families on-scene which explains KCMEO's processes and what families should expect, but investigators we interviewed stated they rarely use the handout because they are concerned it may be outdated. Additionally, the handout does not encourage people to communicate any potential cultural or religious requests to KCMEO or provide information on how soon such requests should be made. Updating this material could better ensure that communities are aware of their ability to communicate their needs with KCMEO.

Lack of training leave staff feeling less prepared

KCMEO does not provide training or resources for investigators specific to working with American Indian or Alaskan Native decedents, leading to potential gaps in staff's ability to meet the cultural or religious needs of tribes and their family members. Some investigators we interviewed reported feeling initially unprepared for being on-scene with the families and loved ones of American Indian or Alaskan Native decedents. They stated that they did not receive training specific to cultural practices and said they had to "learn by doing." Investigations staff added that this approach creates the risk that interactions could go poorly because staff likely would not know if they were doing anything inappropriate or insensitive until it was too late. Additionally, KCMEO staff have state requirements to attempt to contact family members or a representative from any affected tribes, tribal organizations, or communities so that they may visit the remains for the purpose of conducting any spiritual practices or ceremonies to honor or recognize the person's passing prior to removal of the decedent.[7] KCMEO does not have resources that staff could use to better prepare themselves, such as contacts with tribes or a lessons learned database that would allow staff to document and share information they have gained from cases involving American Indian and Alaskan Native decedents such as cultural practices or successful accommodations, so that other staff could use it to inform future case work. Documented, accessible resources could be particularly useful for newer investigators as they often work late night shifts when there isn't a manager or more experienced staff member available to ask for guidance before going out to the scene.[8] Standards recommend ensuring ways for staff to have the resources they need to achieve agency objectives.

As an example of an existing practice that helped KCMEO meet the needs of communities it connects with, KCMEO worked to establish a liaison with a local Somali Muslim community to ensure that the community knows who KCMEO is, what it does, what they can expect, and how to reach KCMEO for any requests. KCMEO staff will also reach out proactively to the liaison if they know a person is Somali Muslim to ensure they are acting in response to cultural or religious needs. Experience with this liaison could inform KCMEO's future work with American Indian and Alaskan Native communities.

[7] RCW 68.50.325 Indigenous persons — Identification of remains — Spiritual practices.

[8] KCMEO investigators bid on shifts based on seniority, meaning that staff who are less experienced often work late night shifts.

Recommendation 5

The King County Medical Examiner's Office should create and update tools and resources for staff to increase their preparedness to meet the needs of American Indian and Alaskan Native tribes and communities. This should include, at a minimum, updating family handouts with instructions for requesting accommodation and developing informational material for staff such as training, contact lists, and lessons learned.

CONCLUSION

We found that while KCMEO has implemented several leading practices to safeguard high-risk items in its possession, such as cash and suspected illicit drugs, it lacks some controls that would allow it to detect if high-risk items have been lost, taken, or damaged. By developing a risk strategy for its high-risk items, starting with a risk assessment, KCMEO can prioritize which additional controls to implement based on the impact and likelihood of risks and its limited staff and financial resources. KCMEO can also use the risk assessment process to potentially mitigate risks by reducing the number or amount of high-risk items it must safeguard. For example, KCMEO could identify opportunities to further standardize collection processes by investigators and avoid excess amounts of suspected illicit drugs. As part of its risk assessment, KCMEO could also identify opportunities to reduce the number of items it needs to safeguard by updating its retention and disposal policies to align with its storage capacity. These steps will help reduce risks to staff, King County, and the public. By implementing additional processes to prevent and detect conflicts of interest, KCMEO can better ensure the procedure by which it identifies external entities for services is done fairly and ethically. Finally, while representatives from local tribes generally spoke positively about their experiences working with KCMEO staff, KCMEO could bolster its staff preparedness to work on cases involving American Indian or Alaskan Native decedents by increasing training opportunities and informational resources for staff and by updating handouts for families. By implementing the recommendations in this report, KCMEO can further safeguard items, support its staff, reduce risk to the County, and provide assurance to the public about its practices.

Appendix 1: Potential Gaps in King County Medical Examiner's Office Controls for High-Risk Items

We reviewed over 90 controls recommended or required by federal agencies, law enforcement organizations, the Revised Code of Washington, and King County Code, and used this review to assess King County Medical Examiner's Office (KCMEO) controls for the collection, processing, storage, and disposal of high-risk items, including cash property and suspected prescription and illegal drugs. We identified potential gaps between KCMEO practices and criteria, reducing KCMEO's ability to safeguard items from theft, loss, or damage. In our report, we recommend KCMEO develop a risk strategy to prioritize control improvements based on its assessment of risk and its available resources as not all these controls may be necessary or feasible to implement. This appendix contains the results of our audit work where we identified potential control gaps that KCMEO could use in its risk assessment process.

EXHIBIT 1: Potential gaps in King County Medical Examiner's Office controls for high-risk items.

SECTION A	
STORAGE CONTROLS	**KCMEO PRACTICE AND POTENTIAL CONTROL GAP**
1. Items are stored in a place with physical security to prevent unauthorized access. High-risk items are stored with additional security measures within a secure space to prevent unauthorized access. Facility should be large enough to accommodate items.	Items are stored in temporary and long-term storage areas that have physical locks with limited access. Medication and suspected drugs are stored in a separate locker and locked cabinets. **Potential gap:** The team observed packages with medication and suspected drugs stored outside designated secured storage locker. KCMEO addressed this by adding more secure storage so that all items fit.
2. There is a way to see who has accessed the secure location.	KCMEO can obtain reports of who used an employee key card to access the processing and evidence rooms. KCMEO can also see video

	surveillance of the processing room and evidence room for up to 30 days. **Potential gap:** KCMEO cannot see records of who has accessed the vault storage through the electronic lock. Video surveillance is not in the vault itself, although the property room video surveillance could show access for at least 30 days.
3. The means or methods used to access the secure room are inventoried. The means are also reset regularly and when there is turnover of staff with access.	Access requiring a code or key card is terminated upon a staff member no longer being an employee. **Potential gap**: KCMEO does not regularly inventory and reset means to access secure storage.
4. There are after-hours protocols for accessing the secure facility.	KCMEO investigation staff who work after normal business hours have limited access to secure storage. **Potential gap:** KCMEO does not have additional protocols documented.
5. Physical security measures are regularly tested.	**Potential gap**: Staff reported there are no testing processes for security measures.
6. Facility has controls to prevent environmental contamination of items. Items are stored under correct conditions, i.e., atmospheric pressure, temperature, and/or humidity.	**Potential gap**: Staff did not identify measures in place specifically to prevent environmental contamination of items.
7. Dedicated drug storage rooms should have a ventilation system that vents odors and fumes to the exterior of the building.	**Potential gap:** Secure room where drugs are stored does not have ventilation that vents odors and fumes to the exterior of the building.

SECTION B	
PACKAGING AND LABELING CONTROLS	**KCMEO PRACTICE AND POTENTIAL CONTROL GAP**
1. High-risk items should be stored in appropriate containers. Packaging should be appropriate for size of the item.	Most items are stored in small or large manila envelopes. Some sharps containers are available for items like needles. **Potential gap:** We observed that containers were sometimes too small or too large for items.
2. High-risk items should have labels that allow reader to know exactly what is in the container.	Item labels generally included name of decedent and case number. We observed some staff added other information such as the number of item containers for the case and whether the item is property. **Potential gap:** We observed and staff reported that not all staff label items the same way. We observed labels that did not list items included in containers.
3. Cash should be stored in an envelope that is a different color than other items.	**Potential gap**: KCMEO does not store cash in separately colored envelopes.
4. Cash is stored separately from other items.	**Potential gap:** We observed that cash is placed in its own manila envelope, but that envelope is stored with other decedent property.

SECTION C	
COLLECTION CONTROLS	**KCMEO PRACTICE AND POTENTIAL CONTROL GAP**
1. Collection procedures should ensure items such as hazardous substances, drugs, controlled	Items are placed into storage containers (i.e., manila envelopes, sharps containers).

substances, or firearms evidence are transported safely.	**Potential gap:** No additional safety controls for transportation of items.
2. Agencies should have procedures for collecting high-risk items on-scene.	KCMEO details collection procedures in its manual for investigators. **Potential gap:** Staff noted that there is some inconsistency in how staff members implement collection procedures. For example, staff noted that it can be unclear how much of a suspected drug substance should be collected.

SECTION D	
RETENTION AND DISPOSAL CONTROLS	**KCMEO PRACTICE AND POTENTIAL CONTROL GAP**
Retention and disposal policies should be reflective of agency's space limitations, including setting timelines for disposal.	Staff reported that they monitor whether the storage area is getting full. **Potential gap:** KCMEO's retention and disposal timelines may result in inventory that exceeds available space. KCMEO sets retention timeframes based on requirements in the Revised Code of Washington and potential use of items by law enforcement agencies, not space limitations.

SECTION E	
PROCESSING AND TRACKING CONTROLS	**KCMEO PRACTICE AND POTENTIAL CONTROL GAP**
1. Drugs should be weighed in a manner that is consistent with crime lab and department storage requirements.	**Potential gap:** KCMEO does not weigh suspected drugs.

2. Inventories of items should be done annually.	**Potential gap:** Staff reported that inventories are not done annually.
3. All "transactions" involving high-risk items should be recorded (i.e., who did what, when, status of item).	KCMEO records this information in paper and electronic records. **Potential gap**: We identified several issues with electronic data reliability, including outdated location status and nonspecific categories for who items were released to for some entries.

SECTION F	
GENERAL CONTROLS	**KCMEO PRACTICE AND POTENTIAL CONTROL GAP**
All employees should receive training and stay current regarding evidence and/or property control within the scope of their job duties.	KCMEO investigators pair new investigators with experienced investigators for six months, where the new staff would observe evidence and property procedures. KCMEO distributes policy updates electronically. **Potential gap:** KCMEO does not provide specific training for item controls. The current process of pairing new staff with experienced staff could exacerbate inconsistencies in practices. Staff reported that the electronic distribution system for policy updates can be hard to use.

Source: King County Auditor's Office observation of King County Medical Examiner's Office practiced assessment of control procedures

Appendix 2: Executive Response

King County | Office of the Executive

Executive Girmay Zahilay
Chinook Building, CNK-EX-0800
401 Fifth Avenue, Suite 800
Seattle, WA 98104-2391

April 1, 2026

Kymber Waltmunson
King County Auditor
Room 1033
King County Courthouse
KCAO@kingcounty.gov

Dear Ms. Waltmunson,

Thank you for the opportunity to review and comment on the audit report titled "Medical Examiner's Office: Continuous Improvement Can Strengthen Control Environment."

The enclosed recommendation table outlines responses to each of the five recommendations. The King County Medical Examiner's Office (KCMEO) concurs with all five recommendations presented in the report. The insights provided are valuable, and KCMEO welcomes the opportunity to collaborate on strengthening their systems, improving service delivery, and ensuring continued accountability to the public we serve.

KCMEO and Prevention Division are eager to implement the recommendations set forth in this report. We appreciate the time and effort your staff put into this audit.

Sincerely,

Aaron Rubardt
Budget Director, King County Executive Office

Recommendation 1

The King County Medical Examiner's Office should develop, document, and implement a comprehensive risk management strategy for high-risk items, including regular risk assessment, risk mitigation, and monitoring and review of these processes.

AGENCY RESPONSE

CONCURRENCE	**CONCUR**
IMPLEMENTATION DATE	November 2026
RESPONSIBLE AGENCY	King County Medical Examiner's Office (KCMEO)
COMMENT	KCMEO agrees that a comprehensive risk management strategy (including regular review) for high-risk items could be beneficial and plans to engage with DPH Risk Management and King County Office of Risk Management Services on implementation.

Recommendation 2

The King County Medical Examiner's Office (KCMEO) should use the results of its risk assessment completed in response to Recommendation 1 to inform which preventive and detective controls to improve or implement to prevent loss, theft, misuse, and injury resulting from the high-risk items in its possession. As part of this assessment, KCMEO should document consideration of the following controls:

- **conducting at least annual inventories of high-risk items**
- **monitoring high-risk item data for potential issues to investigate further**
- **improving data to support monitoring and inventory controls**
- **installing video surveillance in the secure storage vault**
- **ensuring more detailed access data for the secure storage vault**
- **improving collection and packaging procedures for high-risk items**
- **ensuring more consistent item labeling that make contents clear.**

Recommendation 2 continues on next page.

AGENCY RESPONSE

CONCURRENCE **CONCUR**

IMPLEMENTATION DATE October 2027

RESPONSIBLE AGENCY KCMEO

COMMENT KCMEO currently has several preventative controls in place and commits to enhancing these and adding detective controls for high-risk items in its possession in line with priority areas defined by the risk management strategy referenced in Recommendation 1. As part of this work, KCMEO will document consideration of the controls listed above. Cost and revenue source identification for mitigation will be key components to successful implementation. KCMEO is currently working with FMD and KCIT to understand options for storage vault camera placement and access logs in alignment with the controls listed in this recommendation.

Recommendation 3

The King County Medical Examiner's Office (KCMEO) should update its policies to define and outline expectations regarding reporting, monitoring, and responding to conflicts of interest for all job classifications. KCMEO should ensure its disclosure policy aligns with the King County Code of Ethics as well as requirements from the Department of Human Resources and Public Health – Seattle & King County.

AGENCY RESPONSE

CONCURRENCE **CONCUR**

IMPLEMENTATION DATE June 2027

RESPONSIBLE AGENCY DPH and KCMEO

COMMENT KCMEO has begun the process of educating staff about what a conflict of interest might look like in their role and plans to update staff handbooks/manuals to document the policy. KCMEO will ensure its handbooks/manuals align with the disclosure requirements in the King County Code of Ethics as well as requirements from the Department of Human Resources and Public Health – Seattle & King County. KCMEO recently reviewed and updated the list of staff responsible for filing Financial Disclosure forms with DES and will continue to do so annually.

Recommendation 4

The King County Medical Examiner's Office should ensure that its efforts to define and control for conflicts of interest, as detailed in Recommendation 3, include provisions for the entities it partners with for King County Indigent Remains Program services.

AGENCY RESPONSE

CONCURRENCE **CONCUR**

IMPLEMENTATION DATE August 2027

RESPONSIBLE AGENCY Prevention Division and KCMEO

COMMENT Prevention and KCMEO will work with DPH to review its approach to procuring KCIRP services to ensure alignment with best practices and DPH standards. This process and any subsequent action that comes out of it will give careful consideration to controls for conflicts of interest.

Recommendation 5

The King County Medical Examiner's Office should create and update tools and resources for staff to increase their preparedness to meet the needs of American Indian and Alaskan Native tribes and communities. This should include, at a minimum, updating family handouts with instructions for requesting accommodation and developing informational material for staff such as training, contact lists, and lessons learned.

AGENCY RESPONSE

CONCURRENCE **CONCUR**

IMPLEMENTATION DATE June 2027

RESPONSIBLE AGENCY KCMEO

COMMENT KCMEO welcomes opportunities to serve American Indian and Alaskan Native communities better; it is pursuing suggested revisions to information shared with families and loved ones, including its handout. KCMEO will also explore ways it can bolster internal information sharing to ensure investigators and other staff are well-equipped to meet accommodation needs.

Appendix 3: Statement of Compliance, Scope, Objective, & Methodology

Statement of Compliance with Government Auditing Standards

We conducted this performance audit in accordance with Generally Accepted Government Auditing Standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Scope of Work on Internal Controls

We assessed the extent to which King County Medical Examiner's Office (KCMEO) internal controls to safeguard high-risk items were aligned with leading practices to prevent the loss, theft, damage, or misuse of medication, cash, firearms, and suspected illicit drugs and related materials. We also assessed KCMEO controls to prevent, detect, and mitigate conflicts of interest when using external service providers. Finally, we assessed internal controls for ensuring equitable services when a case involves a decedent who is American Indian or Alaskan Native, particularly as the controls relate to staff preparedness to achieve agency objectives. We identified some gaps in each area, which are included in the audit report.

Scope

This audit evaluated KCMEO's controls over selected processes and high-risk items, including drugs, cash, and firearms between 2020 and 2025.

Objectives

1. To what extent does the KCMEO have sufficient controls for the management, storage, and disposal of high-risk items?
2. To what extent does the KCMEO have sufficient steps in place to identify and manage staff conflicts of interest in the procurement process?
3. How does the KCMEO conduct its work when it identifies an American Indian or Alaskan Native decedent?

Methodology

Our audit reviewed controls over high-risk items through data analysis, in-person observations, interviews, and documentation reviews. With the assistance of KCMEO's data expert, we obtained data on high-risk items collected between January 2020 and December 2025 from KCMEO's case management database. We used this data to analyze descriptive information about these items, look at trends over time, and understand the reliability of the data for its potential use in control activities. As part of our data reliability testing, we identified some concerns that could affect overall item counts. In particular, data reliability might have been affected by KCMEO's move to a new data system in 2020. Because of this, drug item, medication, and currency counts we include in this report from 2020 may include errors but are used for descriptive purposes only in the report. We shared our draft analysis and worked with KCMEO staff multiple times to check that our methods produced as accurate results as possible. We conducted site visits at KCMEO's facility at Harborview Medical Center in June, October, and November of 2025. During these site visits, we observed the implementation of controls when items were being collected, processed, stored, released, and disposed. The audit team conducted one ride along with an investigator to a scene to observe the collection of property and evidence. We also interviewed KCMEO staff from the Investigations, Overdose Surveillance, and Autopsy groups as well as leadership and administrative staff about the existence and implementation of controls as well as feedback for improvement. We reviewed KCMEO documentation of controls in policy documents, employee manuals, and public-facing forms and information sheets. We reviewed 95 controls recommended or required by the US Department of Justice, International Association for Property and Evidence, International Association for Chiefs of Police, Organization of Scientific Area Committees for Forensic Science, the Revised Code of Washington, and King County Code and used these controls to assess the evidence we collected on KCMEO controls for high-risk items.

Our audit also reviewed controls for preventing, detecting, and mitigating conflicts of interest when KCMEO utilizes external service providers in its work. We reviewed financial data from KCMEO and King County Oracle EBS to understand how much KCMEO spends on external services. We then narrowed our focus to the King County Indigent Remains Program as this program recruits private external funeral and cremation services while other external services were primarily contracted from other public entities like laboratory services. We checked for potential conflicts of interest using Washington State Secretary of State data on the service providers and compared that data to KCMEO data. To understand controls, we interviewed KCMEO staff and reviewed forms and documentation relevant to conflicts of interest and assessed these controls against practices and requirements from the King County Code of Ethics, Municipal Research and Services Center, Revised Code of Washington, US Housing and Urban Development, American Bar Association, and the International Chamber of Commerce.

To understand how KCMEO conducts its work when it identifies an American Indian or Alaskan Native decedent, we conducted initial interviews with KCMEO managers and leadership and reviewed internal policy and procedure documents as well as requirements in the Revised Code of Washington. We spoke with the Western Region tribal liaison for the Washington State Missing and Murdered Indigenous Women and People Task Force. We reached out to ten tribes and organizations serving American Indian and Alaskan Native people in or near King County and interviewed staff from two tribes. We also reviewed reports from the Urban Indian Health Institute. We also included questions in our interviews with KCMEO investigations and autopsy staff about working on cases involving American Indian and Alaskan Native decedents. We also reviewed KCMEO communication resources like the brochure provided to families about KCMEO practices and services.

Appendix 4: List of Recommendations

Recommendation 1

The King County Medical Examiner's Office should develop, document, and implement a comprehensive risk management strategy for high-risk items, including regular risk assessment, risk mitigation, and monitoring and review of these processes.

Recommendation 2

The King County Medical Examiner's Office (KCMEO) should use the results of its risk assessment completed in response to Recommendation 1 to inform which preventive and detective controls to improve or implement to prevent loss, theft, misuse, and injury resulting from the high-risk items in its possession. As part of this assessment, KCMEO should document consideration of the following controls:

- conducting at least annual inventories of high-risk items
- monitoring high-risk item data for potential issues to investigate further
- improving data to support monitoring and inventory controls
- installing video surveillance in the secure storage vault
- ensuring more detailed access data for the secure storage vault
- improving collection and packaging procedures for high-risk items
- ensuring more consistent item labeling that make contents clear.

Recommendation 3

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Recommendation 4

The King County Medical Examiner's Office should ensure that its efforts to define and control for conflicts of interest, as detailed in Recommendation 3, include provisions for the entities it partners with for King County Indigent Remains Program services.

Recommendation 5

The King County Medical Examiner's Office should create and update tools and resources for staff to increase their preparedness to meet the needs of American Indian and Alaskan Native tribes and communities. This should include, at a minimum, updating family handouts with instructions for requesting accommodation and developing informational material for staff such as training, contact lists, and lessons learned.

Advancing Performance & Accountability

KYMBER WALTMUNSON, KING COUNTY AUDITOR

MISSION Improve government performance, accountability, and transparency by providing impactful, independent analyses

VALUES INDEPENDENCE • CREDIBILITY • IMPACT

The King County Auditor's Office is committed to equity, social justice, and ensuring that King County is an accountable, inclusive, and anti-racist government. While planning our work, we develop research questions that aim to improve the efficiency and effectiveness of King County government and to identify and help dismantle systemic racism. In analysis we strive to ensure that communities referenced are seen, not erased. We promote aligning King County data collection, storage, and categorization with just practices. We endeavor to use terms that are respectful, representative, and people- and community-centered, recognizing that inclusive language continues to evolve. For more information, see the King County Equity and Social Justice Strategic Plan, King County's statement on racial justice, and the King County Auditor's Office Strategic Plan.

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